

EXHIBIT 26

521-282725



Social Security Number: 521-28-2725

Date of Birth (For MVR): 06/06/66

Today's Date: 11-29-04

J.B. Hunt Transport, Inc. P.O. Box 858, Lowell, AR 72745 1-800-233-5706

APPLICATION

J.B. Hunt Transport, Inc. is an Equal Opportunity Employer and does not discriminate on the basis of race, color, religion, gender, sexual orientation, national origin, ancestry, age, marital status or military status.

Please print plainly and complete all blanks.

Referred By: _____

J.B. Hunt Driver's Name _____ Alpha Code _____

This Application will be considered for thirty days from the date it is submitted. After that time, a new application must be submitted for employment consideration.
Personal Information

Name:	First	Middle	Last	Suffix	Nickname/Preferred
Name:	MARLAYNA	GEORGETTE	TILLMAN	JR	JET
AKA/Alias:	MARLAYNA	GEORGETTE	PALMER		JET

Do you have a legal right to work in the US? Yes No (If hired, proof of status will be required)

Address **Permanent** (Require 3 years of permanent addresses)

From	To	Street	County	City	State	Zip	Country
11 '04 - Present		497 Linden Blvd C-7		Brooklyn	NY	11203	USA
2 '02 - 10 '04		7 Colony Blvd #111		Wilmington	DE	19802	USA
3 '93 - 2 '02		2017 S. 71ST ST		Philadelphia	PA	19142	USA

Current Mailing Address

Same as current permanent address

From	To	Street	County	City	State	Zip	Country
11 '04 - Present		497 Linden Blvd C-7		Brooklyn	NY	11203	USA

Phone: (718) 771-2212 Cell Phone: (610) 457-9507 E-Mail: mg.tillman@yahoo.com

Driving School

School Name	Location	Phone #	Hours	Graduation Date
N/A				

Qualifying Questions (A checkmark in the box indicates a "Yes" response; a checkmark in the circle indicates a "No" response)

- * A. Have you ever had any driving license, permit, or privilege revoked?
- * B. Have you ever been convicted for driving under the influence of drugs or alcohol or have a charge pending?
- * C. Have you ever been convicted for possession, sale or use of a narcotic drug, amphetamine, or derivative thereof or have a charge pending?
- * D. Have you ever been convicted of a crime or have a charge pending?
- * E. Have you ever been convicted of an offense involving the use of drugs or alcohol?
- * F. Have you ever tested positive, or refused to test, on any pre-employment drug or alcohol test administered by any company that you applied for, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past 3 years?
- * G. Have you ever tested positive on any drug test, or tested at 0.02 or greater on an alcohol test, or refused to take any drug or alcohol test at any previous employer?

Explain yes answer: N/A

Emergency Contact Information

Name	Address	Phone	Relationship
CAROLYN PALMER	2017 S. 71ST STREET PHILA PA 19142	215-729-2927	mother

Personal References

Name	Phone	Relationship
Kennedy Ross	(646) 872-2241	fiancee
Nate Coleman, Jr.	(215) 888-0831	cousin

For Office Personnel Use Only Date Received _____
 Revised 8/2004

Driver Application

1 of 1

PBG 01095

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Military Branch	From	To	Highest Rank Achieved	Rank at Discharge
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Driving License Information (Past 5 years)

State	Number	Class	Expiration Date	Endorsements (Haz, Tank, Double/Triple, Passenger)
Current	<u>DE</u>	<u>CDL-A</u>	<u>6/6/2007</u>	<u>Airbrake</u>

Previous _____

Previous _____

Previous _____

Traffic Convictions and Forfeitures (Past 5 years)

Traffic Violations:

Date	State	Charge Type	Vehicle Type	Penalty	Speed	Speed Limit
<u>N/A</u>		<u>NONE</u>				

Accident Record (Past 5 years) - List all (regardless of severity)

Date	State	Vehicle Type	Company (if commercial vehicle)	Damage Amt	Inj	Fatal	Ticker? Tows?
<u>N/A</u>		<u>NONE</u>		\$			
				\$			
				\$			
				\$			

Employment History (Past 3 years for all employment and past 10 years of commercial driving)

Begin with your present or most recent job and work backwards in order. Be sure to list all employers for at least 3 years and at least 10 years of employers where you drove commercial motor vehicles. Include all full-time and part-time employment including military service, self-employment, and unemployment periods. Provide a supplemental sheet if all of your employment cannot be listed in the space provided. Telephone numbers are required for all employers.

Current Period: If not unemployed provide dates from previous section. If employed, check if you receive benefits? Yes No

Current Employer	Name <u>Pepsi Bottling Group</u>	Supervisor <u>Kim Bouman</u>
Dates of Employment	Address <u>3501 Governor Printz Blvd. (DE)</u>	Telephone <u>(302) 761-4848</u>
To <u>Present</u>	Position held <u>transport driver</u>	Rate of Pay <u>17.30 hr.</u> # of States Driven <u>3</u>
(month, year)	Months experience driving: Straight Truck <u>28</u>	Tractor/Semi-Trailer <u>28</u> Doubles/Triples _____
From <u>5/8/2001</u>	Flatbed _____	Tanker _____ Other _____
(month, year)	Reason for leaving/wanting to leave <u>haven't left / but need higher rate of pay</u>	

Second Last Period: If not unemployed provide dates from previous section. If employed, check if you receive benefits? Yes No

2nd Last Employer	Name _____	Supervisor _____
Dates of Employment	Address _____	Telephone _____
To _____	Position held _____	Rate of Pay _____ # of States Driven _____
(month, year)	Months experience driving: Straight Truck _____	Tractor/Semi-Trailer _____ Doubles/Triples _____
From _____	Flatbed _____	Tanker _____ Other _____
(month, year)	Reason for leaving _____	

3rd Last Period: If not unemployed provide dates from previous section. If employed, check if you receive benefits? Yes No

3rd Last Employer	Name _____	Supervisor _____
Dates of Employment	Address _____	Telephone _____
To _____	Position held _____	Rate of Pay _____ # of States Driven _____
(month, year)	Months experience driving: Straight Truck _____	Tractor/Semi-Trailer _____ Doubles/Triples _____
From _____	Flatbed _____	Tanker _____ Other _____
(month, year)	Reason for leaving _____	

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Fourth Last Period: I am unemployed. Provide dates - From _____ To _____ Did you receive benefits? Yes No

4th Last Employer Dates of Employment To _____ (month, year) From _____ (month, year)	Name _____ Supervisor _____ Address _____ Telephone (_____) Position held _____ Rate of Pay _____ # of States Driven _____ Months experience driving: Straight Truck _____ Tractor/Semi-Trailer _____ Doubles/Triples _____ Flatbed _____ Tanker _____ Other _____ Reason for leaving _____
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Fifth Last Period: I am unemployed. Provide dates - From _____ To _____ Did you receive benefits? Yes No

5th Last Employer Dates of Employment To _____ (month, year) From _____ (month, year)	Name _____ Supervisor _____ Address _____ Telephone (_____) Position held _____ Rate of Pay _____ # of States Driven _____ Months experience driving: Straight Truck _____ Tractor/Semi-Trailer _____ Doubles/Triples _____ Flatbed _____ Tanker _____ Other _____ Reason for leaving _____
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Sixth Last Period: I am unemployed. Provide dates - From _____ To _____ Did you receive benefits? Yes No

6th Last Employer Dates of Employment To _____ (month, year) From _____ (month, year)	Name _____ Supervisor _____ Address _____ Telephone (_____) Position held _____ Rate of Pay _____ # of States Driven _____ Months experience driving: Straight Truck _____ Tractor/Semi-Trailer _____ Doubles/Triples _____ Flatbed _____ Tanker _____ Other _____ Reason for leaving _____
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Seventh Last Period: I am unemployed. Provide dates - From _____ To _____ Did you receive benefits? Yes No

7th Last Employer !Dates of Employment To _____ (month, year) From _____ (month, year)	Name _____ Supervisor _____ Address _____ Telephone (_____) Position held _____ Rate of Pay _____ # of States Driven _____ Months experience driving: Straight Truck _____ Tractor/Semi-Trailer _____ Doubles/Triples _____ Flatbed _____ Tanker _____ Other _____ Reason for leaving _____
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[List all remaining previous employers below in order (Remember - 3 years all employment and 10 years commercial driving):

From	To	Name	Address	Telephone	Reason for Leaving
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Social Security Number: 521 . 28 . 2725Today's Date: 11/29/04

J.B. Hunt Transport, Inc. P.O. Box 659, Lowell, AR 72745 1-800-233-5706

Driver Application - Certifications, Disclaimers, and Acknowledgements

1) **General Disclaimers:** I understand that J.B. Hunt Transport, Inc., hereafter "J.B. Hunt", is under no obligation to hire me, that any employment I am offered will not be for any specified period of time, that my employment is terminable by either party at will with or without notice or cause, and that no representative of J.B. Hunt has authority to enter into any agreement with me contrary to the foregoing. I understand that nothing contained in my employment application, or in granting of an interview, is intended to create an employment contract between J.B. Hunt and myself for either employment or for the providing of any benefit. I understand that none of the benefits or policies in any handbook issued to me by J.B. Hunt are intended by reason of its publication to confer any rights or privileges to any benefits or policies, or entitle me to remain employed by J.B. Hunt, or to change my status as an "at will" employee (as permitted by law). I understand that all statements and provisions in the handbook are procedural or are a guideline and that J.B. Hunt has the right to change any policy, benefit, or procedure at any time without notice.

2) **Notice of Drug and Alcohol Testing Requirements:** J.B. Hunt is concerned with the health and safety of its employees, as well as the safety of its customers and the motoring public. Therefore, the company requires, as one of the steps of the hiring process and according to Federal Motor Carrier Safety Administration regulations, that all otherwise qualified applicants for employment submit to a drug test. I understand I will be required to provide urine, hair, or other biological samples to be tested for the presence of controlled substances including, but not limited to, marijuana, cocaine, amphetamines, opiates, and phencyclidine. If employed, I will also be required to submit to drug and/or alcohol tests as required by J.B. Hunt's substance abuse policy and/or federal, state, or local regulations. I understand that J.B. Hunt may contract with a third party to assist in the administration of drug and alcohol testing and agree to this party being provided with all information to which J.B. Hunt is entitled and subject to the same confidentiality requirements as J.B. Hunt. I further understand that a confirmed positive drug or alcohol test, or a refusal to test, will disqualify me from consideration from employment or will result in my termination from employment. J.B. Hunt will report the results of drug and alcohol test results in accordance with regulatory requirements, including release to motor carriers and other third parties upon receipt of a properly executed release document. I also understand that a positive result or refusal on a post accident test may result in denial of any Workers Compensation claims I may make as a result of injuries sustained in the accident.

3) **Drug and Alcohol History Release Authorization:** Under the authority granted me by 49 CFR Parts 40 and 382, I hereby authorize and require my previous and/or current employers specifically listed as well as any other person or company provided by me in writing or by verbal interview by whom I was employed or to whom I applied for employment in the three year period preceding the date of this application to release the date, type of test and result of all drug and alcohol test taken by me, including the date and type of test for any refusal by me to take a drug or alcohol test, to the Vice President of Driver Personnel, or the Employment Placement Specialist assigned to process my application at J. B. Hunt. If I tested positive on any controlled substance test, had an alcohol test with a concentration of 0.04 or greater, or refused to take any drug or alcohol test, I also authorize the release of all information concerning my referral to a Substance Abuse Professional (SAP) including all records pertaining to my evaluation and treatment (if required by SAP). I authorize this release by whatever means is most expedient and agree to hold harmless any past employer or any person or company I applied with as well as their employees, agents, or representatives from all liability or damage that may arise from the release of the information specifically authorized here.

4) **Work Record and Consumer Reports Release Authorization:** I hereby authorize, without liability, any person or organization, including but not limited to any educational institution, training facility or any institution whose name I have given as a reference, or by whom I have been previously employed, to furnish J. B. Hunt any information they may have concerning my character, habits, ability, financial responsibility, job performance, reasons for leaving employment. Furthermore, there may be entities that J.B. Hunt does business with which may request investigative reports or consumer reports which apply to my background. In this case, these reports would apply to my assignment to projects related to the customer, permission to be on the customers' premises and to handle its products and other security concerns of the customer. I hereby release all such persons and organizations from any claims for damages of any kind, which may occur to me by reason of furnishing such information. I hereby authorize any law enforcement agency or court of record to furnish J. B. Hunt information concerning Motor Vehicle Record, or any felony or misdemeanor of which I have been convicted.

5) **Applicant Rights (pursuant to 49 CFR Part 391.23(f) effective October 29, 2004):** I understand that I have the right to review information provided by my previous employers, to have errors corrected by the previous employers and re-sent to J.B. Hunt once corrected, and to have a rebuttal statement attached to any alleged erroneous information should my previous employer and I not agree on the accuracy of the information. I further understand that the information provided by me will be used in making employment determinations and that my previous employers will be contacted for the purpose of investigating my safety performance history information as required by paragraphs (d) and (e) or 49 CFR Part 391.23. Request to review previous employer information must be in writing and mailed to *Driver Personnel - Information Request; PO Box 539, Lowell, AR 72745*.

6) **Agreement to Follow Rules:** If employed, I agree to abide by and observe all company rules, guidelines, and regulations as published by the company or in publicly available regulations or publicly displayed postings. I understand that there is no expectation of privacy for any of my personal property on J.B. Hunt premises, including J.B. Hunt trucks. I consent to and agree that J.B. Hunt may search my personal property located on J.B. Hunt property, along with J.B. Hunt desks, lockers, toolkits, etc. for the purpose of investigating possible violations of company rules or violation of any local, state, or federal law.

7) **Medical Records Release Authorization:** I authorize J.B. Hunt to obtain any medical documentation or information concerning my past or present medical status. I release anyone with such records from any liability, claim, or damages for providing medical information concerning me to J.B. Hunt.

8) **Electronic Records:** I understand that J.B. Hunt uses electronic records and my original paper application will not be retained.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. Any falsification could result in denial of employment or termination of employment, if hired.

MARLAYNA TILLMAN

Applicant Name (Printed)

Applicant Signature

11/29/04

Date